

MSI DRUG FORMULARY RULES

Rev. 4/2/2012

OCMSI -- Drug Formulary Rules

Medications covered for urgent, emergent, and prevention only.

1	Formulary drugs include all strengths and dosage forms (except injectable and powders) or as indicated
1.A	All drugs on formulary are for immediate release only, unless the formulary specifies otherwise.
2	No More Than 30 Days Supply with a maximum of 8 Rx per-patient-per-month (see Exception list below in 2A)
2.A	Exceptions to 8 Rx/month include Antibiotics, all diabetic medications, all cardiovascular medications, Needles, Syringes, Lancets, Diabetic Test Strips, Blood Glucose Monitors, and Unfractionated heparins.
3	No Mail Order
4	No DAW - Generic Only
5	Switch Brand to Generic if Generic is available irregardless of number of manufacturers
6	Edits:
6.A	Lost Rx - Call in for prior authorization
6.B	Vacation Refill - requires prior authorization (Limited to 30-days supply and NMT 2 within 12 Months)
6.C	Early Refill - 75% of days supply for both acute and chronic medications
7	Compounds are paid at the cost of the primary ingredient -- (pharmacy must provide an NDC number in all prescriptions)
8	Benefit Exclusions / Out-of Scope of the Plan:
8.A	All behavioral health drugs (including antidepressants, antipsychotics, benzodiazepines) are outside of the scope of the program. Refer patients to OCBHS.
8.B	All HIV medications refer to ADAP program
8.C	Refer all applicable brand name medications to the applicable PAP program
8.D	All oncological Brand named medications refer to PAP program